



Houston County Board of Education

PO Box 209

Erin, TN 37061

Phone: 931-289-4148 Fax: 931-289-5543

Certified Personnel Application for Employment

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State Zip Code

Phone: _____ Email Address: _____

Position Desired: _____ Date Available: _____

Have you ever worked for Houston County Schools? Yes No If so, when? _____

Teaching License Information

Tennessee Educator License Number: _____

Date Issued: _____

Expiration Date: _____

Out-of-State Educator License Number: _____

State Issued: _____

List ALL Endorsement Codes and Title of Endorsements*:

_____	_____
_____	_____
_____	_____
_____	_____

***Please attach a copy of Educator License with Endorsements and submit with this application.**

Please Read and Sign

1. I have read and understand the current job description approved by the Board of Education for the position in which I have applied.
2. I understand that my application will remain active for five (5) years, after which time it will be purged from the file and destroyed.
3. I recognize that if employed, the Board of Education may assign or reassign me to a specific position as the need requires.
4. If my most recent employer was another Tennessee public school district and if my termination was voluntary, I can certify that my resignation was, or will be submitted in writing at least thirty (30) days prior to the beginning date stated; or, if with thirty days, that the previous board has waived it's right to such notice. A copy of my letter of resignation or the said board action is attached or will be provided.
5. I have not been dismissed from any previous employment for improper or unprofessional conduct, ineffective service, neglect of duty, incompetence, or insubordination.
6. Have you been convicted of a felony (including a conviction plea of nolo contendere/no contest), improperly used narcotics or intoxicants, been convicted of possessing narcotics, falsified documentation required for licensure, or altered your license or certificate? Yes No
7. I do not have any contagious or communicable diseases, which may endanger the health of children.
8. I am a citizen of the United States of America or have obtained the proper work credentials.
9. I shall support the constitution of Tennessee and the United States of America.
10. I do not advocate the overthrow of the American form of government nor am I a member of a political party that advocates the overthrow of the American form of government.
11. I understand that the misrepresentation of any of the above statements may subject me to a fine, loss of employment opportunity, and/or loss of position if employed.

Signature

Date

Printed Name

Position Desired

Grades:	<u>K-1</u>	<u>2-3</u>	<u>4-5</u>	<u>6</u>	<u>7-8 (Subject)</u>	<u>9-10 (Subject)</u>	<u>11-12 (Subject)</u>
1 st Choice	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____
2 nd Choice	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____
3 rd Choice	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____

Education Background (From most recent)

College/Other: _____ Address: _____
(City and State)

From: _____ To: _____ Major: _____ Minor: _____

College/Other: _____ Address: _____
(City and State)

From: _____ To: _____ Major: _____ Minor: _____

College/Other: _____ Address: _____
(City and State)

From: _____ To: _____ Major: _____ Minor: _____

High School: _____ Address: _____
(City and State)

From: _____ To: _____ Major: _____ Minor: _____

Teaching Experience (From most recent)

School: _____ Phone: _____

Address: _____ Principal: _____

Job Title: _____ Salary: _____

Grades/Subject: _____

From: _____ To: _____ Reason for Leaving: _____

School: _____ Phone: _____

Address: _____ Principal: _____

Job Title: _____ Salary: _____

Grades/Subject: _____

From: _____ To: _____ Reason for Leaving: _____

School: _____ Phone: _____

Address: _____ Principal: _____

Job Title: _____ Salary: _____

Grades/Subject: _____

From: _____ To: _____ Reason for Leaving: _____

Previous Employment (From most recent)

Company: _____ Phone: _____

Address: _____ Principal: _____

Job Title: _____ Salary: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? Yes No

Company: _____ Phone: _____

Address: _____ Principal: _____

Job Title: _____ Salary: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? Yes No

Company: _____ Phone: _____

Address: _____ Principal: _____

Job Title: _____ Salary: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? Yes No

Military Service

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Type of Discharge: _____

If other than Honorable, please explain: _____

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Type of Discharge: _____

If other than Honorable, please explain: _____

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Type of Discharge: _____

If other than Honorable, please explain: _____

Student Teaching (For applicants with less than two years experience.)

School: _____ **Phone:** _____

Address: _____ **Supervising Teacher:** _____

Grade/Subject: _____ **From:** _____ **To:** _____

School: _____ **Phone:** _____

Address: _____ **Supervising Teacher:** _____

Grade/Subject: _____ **From:** _____ **To:** _____

References

Full Name: _____ **Relationship:** _____

Company: _____ **Phone:** _____

Address: _____

Full Name: _____ **Relationship:** _____

Company: _____ **Phone:** _____

Address: _____

Full Name: _____ **Relationship:** _____

Company: _____ **Phone:** _____

Address: _____

Extracurricular Activities (High School, College, Career)

Travel, Honors, Offices (College, Career)

Organizations

Professional: _____

Civic: _____

Are you prepared to:

Elementary: (Check all that apply.)

Teach students in your room?

- | | | |
|--------------------|------------------------------|-----------------------------|
| Art | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Music | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Physical Education | Yes <input type="checkbox"/> | No <input type="checkbox"/> |

Secondary: (Check all that apply.)

Sponsor activities? (Check at least one.)

- | | |
|---------------------------------------|------------------------------------|
| Cheerleading <input type="checkbox"/> | Coach <input type="checkbox"/> |
| Drama <input type="checkbox"/> | Forensic <input type="checkbox"/> |
| Music <input type="checkbox"/> | Newspaper <input type="checkbox"/> |
| Senior Class <input type="checkbox"/> | Year Book <input type="checkbox"/> |
| Other <input type="checkbox"/> | |

(If other, please specify.) _____

Make a brief statement on why you have chosen teaching as a profession.

Accommodations

Is there any accommodation you need to perform the essential functions of the position for which you are applying? (Optional) Yes No

If so, please explain: _____

Houston County Schools does not discriminate on the basis of age, race, color, creed, religion, national origin, or disability in the operation of its educational programs, activities, or employment practices.

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my dismissal.

Signature: _____ Date: _____

Submitting Options

Mail to:

Houston County Board of Education
ATTN: Channy Quinn, 6-12 Director of Teaching & Learning
PO Box 209
Erin, TN 37061

Fax to*:

Houston County Board of Education
931-289-5543
ATTN: Channy Quinn

Email to*:

Channy Quinn, 6-12 Director of Teaching & Learning
clarkc3@houstonk12tn.net

***If you choose to Fax or Email your application, please mail a hard copy with your signature.**